Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF ARKANSAS	_	
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	your pictu exar licer Brin- iden	e the name that is on a government-issued ure identification (for nple, your driver's use or passport). g your picture tification to your ting with the trustee.	Yolanda First name Felicia Middle name Jones Last name and Suffix (Sr., Jr., II, III)	First name Middle name Last name and Suffix (Sr., Jr., II, III)
2.	use Inclu	other names you have d in the last 8 years ade your married or den names.		
3.	you num Indi	y the last 4 digits of r Social Security aber or federal vidual Taxpayer atification number	xxx-xx-3013	

Debtor 1 Yolanda Felicia Jones

Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs. Business name(s)	☐ I have not used any business name or EINs. Business name(s)
	doing business as names	EINs	EINs
5.	Where you live	17 Powhattan Dr., Apt. A	If Debtor 2 lives at a different address:
		Sherwood, AR 72120 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Pulaski	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

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Case number (if known)

Par	t 2: Tell the Court About	Your Ban	kruptcy Ca	ase			
7.	The chapter of the Bankruptcy Code you are				ach, see <i>Notice Required by</i> a 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for Ban	kruptcy
	choosing to file under	■ Chap	oter 7				
		☐ Char	oter 11				
		☐ Chap	oter 12				
		☐ Chap					
8.	How you will pay the fee	ab or	out how yo	ou may pay. Typically attorney is submitting	r, if you are paying the fee yo	ck with the clerk's office in your local court for mo ourself, you may pay with cash, cashier's check, alf, your attorney may pay with a credit card or o	, or money
				y the fee in installmee in Installmee in Installments (Off		on, sign and attach the Application for Individua	ls to Pay
		bı ap	ut is not rec oplies to yo	uired to, waive your f ur family size and you	fee, and may do so only if you are unable to pay the fee i	n only if you are filing for Chapter 7. By law, a ju our income is less than 150% of the official pove n installments). If you choose this option, you m cial Form 103B) and file it with your petition.	rty line that
9.	Have you filed for bankruptcy within the	■ No.					
	last 8 years?	☐ Yes.					
			District		When	Case number	
			District		When	Case number	
			District		When	Case number	
10.	Are any bankruptcy	■ No					
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.					
			Debtor			Relationship to you	
			District		When	Case number, if known	
			Debtor			Relationship to you	
			District		When	Case number, if known	
11.	Do you rent your residence?	■ No.	Go to	line 12.			
	residence:	☐ Yes.	Has yo	our landlord obtained	an eviction judgment agains	st you?	
				No. Go to line 12.			
				Yes. Fill out <i>Initial</i> S this bankruptcy peti		Judgment Against You (Form 101A) and file it a	s part of

Debtor 1 Yolanda Felicia Jones

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Deb	otor 1 Yolanda Felicia Jo	ones			Case number (if known)
Par	t 3: Report About Any Bu	ısinesses	You Owi	n as a Sole Proprie	tor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	e and location of bus	siness
	A sole proprietorship is a		Name	of husiness if and	
	business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	oer, Street, City, Sta	te & ZIP Code
	it to this petition.		Chec	k the appropriate bo	ox to describe your business:
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	lefined in 11 U.S.C. § 101(53A))
				Commodity Broke	er (as defined in 11 U.S.C. § 101(6))
				None of the above	е
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline	s. If you in ns, cash-f S.C. 1116	ndicate that you are low statement, and f	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of federal income tax return or if any of these documents do not exist, follow the procedure oter 11.
	For a definition of small	— 1NO.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am t Code	•	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am	filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	· Have Any	/ Hazardo	ous Property or An	y Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?	
	public health or safety? Or do you own any property that needs immediate attention?			diate attention is , why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?	
					Number, Street, City, State & Zip Code

Debtor 1 Yolanda Felicia Jones

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

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Deb	otor 1 Yolanda Felicia Jo	ones		Case numb	er (if known)
Par	t 6: Answer These Quest	ions for R	eporting Purposes		
16.	What kind of debts do you have?	16a.		consumer debts? Consumer debts are defresonal, family, or household purpose."	ined in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.		
			Yes. Go to line 17.		
		16b.		business debts? Business debts are debts	
			☐ No. Go to line 16c.	9 1	
			☐ Yes. Go to line 17.		
		16c.	State the type of debts you	owe that are not consumer debts or busine	ss debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Chapte	er 7. Go to line 18.	
	Do you estimate that after any exempt property is excluded and	Yes.		Do you estimate that after any exempt propagation to distribute to unsecured creditors	perty is excluded and administrative expenses ?
	administrative expenses		■ No		
	are paid that funds will be available for		□Yes		
	distribution to unsecured creditors?				
18.	How many Creditors do	1 -49		1 ,000-5,000	2 5,001-50,000
	you estimate that you owe?	☐ 50-99		<u> </u>	<u> </u>
		☐ 100-1		□ 10,001-25,000	☐ More than100,000
		□ 200-9	99		
19.	How much do you estimate your assets to	\$ 0 - \$	50,000	☐ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion
	be worth?		01 - \$100,000	☐ \$10,000,001 - \$50 million ☐ \$50,000,001 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion
			001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$100 million	☐ More than \$50 billion
20.	How much do you	\$ 0 - \$	50 000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion
	estimate your liabilities to be?		001 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion
	10 00.		001 - \$500,000	□ \$50,000,001 - \$100 million	□ \$10,000,000,001 - \$50 billion
		□ \$500,	001 - \$1 million	□ \$100,000,001 - \$500 million	☐ More than \$50 billion
Par	t7: Sign Below				
For	you	I have ex	camined this petition, and I de	eclare under penalty of perjury that the infor	mation provided is true and correct.
				7, I am aware that I may proceed, if eligible relief available under each chapter, and I c	
		If no atto documer	rney represents me and I did nt, I have obtained and read t	I not pay or agree to pay someone who is not he notice required by 11 U.S.C. § 342(b).	ot an attorney to help me fill out this
		I request	relief in accordance with the	chapter of title 11, United States Code, spe	ecified in this petition.
		bankrupt and 357	cy case can result in fines up I.	nt, concealing property, or obtaining money to \$250,000, or imprisonment for up to 20	or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,
			nda Felicia Jones a Felicia Jones	Signature of Debto	or 2
			e of Debtor 1	Signature of Debit	-
		Executed	d on March 19, 2019	Executed on	
			MM / DD / YYYY	MM	M / DD / YYYY

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Debtor 1 Yolanda Felicia Jones	Case number (if known)	

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ /S/ Clar	ence W. Cash	Date	March 19, 2019
Signature of	Attorney for Debtor		MM / DD / YYYY
/S/ Clarence	ce W. Cash		
Printed name			
Clarence \	W .Cash		
Firm name			
424 West 4	4th Street		
Suite B			
North Little	e Rock, AR 72114		
Number, Street,	City, State & ZIP Code		
Contact phone	501-371-9114	Email address	noemi@cashlawfirm.net
73017 AR			
Bar number & S	tato		

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E:II ::	this informat	tion to identify your	00001				
		tion to identify your					
Debte	or 1	Yolanda Felicia J First Name	Middle Name	Last Name			
Debte	-	First Name	Middle News	LectMone			
` '	. 0,	First Name	Middle Name	Last Name			
Unite	d States Bankr	ruptcy Court for the:	EASTERN DISTRICT C	F ARKANSAS			
Case (if know	number					_	if this is an ed filing
Sun Be as	nmary of complete and nation. Fill out	d accurate as possib t all of your schedul	le. If two married people es first; then complete the	nd Certain Statistic are filing together, both are ne information on this form. the box at the top of this p	e equally responsible for If you are filing amend	r supplying	
Part '	1: Summari	ze Your Assets					
						Your as Value of	sets what you own
1.	Schedule A/B 1a. Copy line 5	: Property (Official Fo 55, Total real estate, fo	orm 106A/B) rom Schedule A/B			\$	0.00
	1b. Copy line 6	2, Total personal pro	perty, from Schedule A/B			\$	7,100.00
	1c. Copy line 6	3, Total of all propert	y on Schedule A/B			\$	7,100.00
Part 2	2: Summari	ze Your Liabilities					
						Your lia Amount	bilities you owe
			laims Secured by Property nn A, <i>Amount of claim,</i> at	(Official Form 106D) the bottom of the last page of	Part 1 of Schedule D	\$	0.00
			Unsecured Claims (Officia 1 (priority unsecured claim	l Form 106E/F) as) from line 6e of <i>Schedule E</i>	:/F	\$	0.00
	3b. Copy the t	otal claims from Part	2 (nonpriority unsecured c	laims) from line 6j of Schedule	e E/F	\$	23,895.85
					Your total liabilities	\$	23,895.85
Part :	3: Summari	ze Your Income and	Expenses				
		ur Income (Official Fo		· I		\$	1,659.00
		our Expenses (Official onthly expenses from li				\$	1,659.00
Part 4	4: Answer T	These Questions for	Administrative and Stati	stical Records			
6.		• •	er Chapters 7, 11, or 13? on this part of the form. C	heck this box and submit this	form to the court with you	ur other sch	edules.
7.	■ Yes What kind of o	debt do you have?					
				debts are those "incurred by a g for statistical purposes. 28 l		a personal,	family, or
		ts are not primarily		ve nothing to report on this pa	art of the form. Check this	box and su	bmit this form to

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

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Debtor 1 Yolanda Felicia Jones Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$______

Opp the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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	r 1	Yolanda Felicia Jones	•		
Debtor	1	First Name	Middle Name Last Name		
Debtor (Spouse,		First Name	Middle Name Last Name		
United	States I	Bankruptcy Court for the: EAS	TERN DISTRICT OF ARKANSAS		
Case r	number				Check if this is ar amended filing
_		orm 106A/B			
<u>Scr</u>	<u>ieau</u>	ıle A/B: Propert	:y		12/15
hink it f nforma	fits best. tion. If m every qu	Be as complete and accurate as pore space is needed, attach a sepatestion.	s. List an asset only once. If an asset fits in more than cossible. If two married people are filing together, both arate sheet to this form. On the top of any additional parts, or Other Real Estate You Own or Have an Interest In	are equally responsible for su	pplying correct
. Do yo	ou own o	or have any legal or equitable intere	est in any residence, building, land, or similar property	?	
■ No	o. Go to F	Part 2.			
□ Ye	es. Wher	e is the property?			
		oe Your Vehicles			
Part 2:	D000111	oo rour romoioo			
someor	ne else d		e interest in any vehicles, whether they are regis to report it on Schedule G: Executory Contracts and ehicles, motorcycles		ehicles you own that
Someor B. Cars D No	ne else d s, vans, o	drives. If you lease a vehicle, also	o report it on Schedule G: Executory Contracts and ehicles, motorcycles	Unexpired Leases. Do not deduct secured cl	aims or exemptions. Put
Someor 3. Cars N Y 3.1	s, vans, o es	drives. If you lease a vehicle, also trucks, tractors, sport utility ve	ehicles, motorcycles Who has an interest in the property? Check one	Unexpired Leases.	aims or exemptions. Put
Someors 3. Cars N Y 3.1	ne else o s, vans, o es Make:	drives. If you lease a vehicle, also trucks, tractors, sport utility very trucks.	o report it on Schedule G: Executory Contracts and ehicles, motorcycles	Do not deduct secured cl the amount of any secure Creditors Who Have Clair	aims or exemptions. Put ed claims on Schedule D: ms Secured by Property.
Someors Response of the second of the secon	ne else cons, vans, oo es Make: Model: Year:	trucks, tractors, sport utility vo	ehicles, motorcycles Who has an interest in the property? Check one	Do not deduct secured cl the amount of any secure	aims or exemptions. Put
Someon 3. Cars N N Y 3.1	ne else constante else sono es Make: Model: Year: Approximother info	Ford Fusion 2010 atte mileage: 148,208 pormation:	ehicles, motorcycles Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	Do not deduct secured cl the amount of any secure Creditors Who Have Clair	aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the
Someon 3. Cars N N Y 3.1	ne else constante els constante else	Ford Fusion 2010 atte mileage: 148,208 pormation:	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Do not deduct secured cl the amount of any secure Creditors Who Have Clair	aims or exemptions. Put d claims on Schedule D: ms Secured by Property. Current value of the
3. Cars N Y 3.1	ne else constante else sono es Make: Model: Year: Approximother info	Ford Fusion 2010 nate mileage: 148,208 ormation: e Lincoln	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property	Do not deduct secured clean the amount of any secure Creditors Who Have Clair Current value of the entire property? \$2,000.00	aims or exemptions. Put ed claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$2,000.00
3. Cars N Y 3.1	me else constants, vans,	Ford Fusion 2010 nate mileage: 148,208 ormation: e Lincoln LS	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only	Do not deduct secured cl the amount of any secure Creditors Who Have Clai Current value of the entire property? \$2,000.00	aims or exemptions. Put ed claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$2,000.00
3. Cars N Y 3.1	me else constants, vans,	Ford Fusion 2010 nate mileage: 148,208 ormation: e Lincoln LS 2000	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$2,000.00 Do not deduct secured class amount of any secure Creditors Who Have Clair Current value of the	aims or exemptions. Put ad claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$2,000.00 aims or exemptions. Put ad claims on Schedule D: ms Secured by Property. Current value of the
3. Cars N Y 3.1	me else constants, vans,	Ford Fusion 2010 nate mileage: Lincoln LS 2000 nate mileage:	who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 3 only Check if this is community property (see instructions)	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$2,000.00 Do not deduct secured of the amount of any secure Creditors Who Have Clair	aims or exemptions. Put ad claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$2,000.00 aims or exemptions. Put ad claims on Schedule D: ms Secured by Property.
3. Cars N Y 3.1	me else constants, vans,	Ford Fusion 2010 nate mileage: 148,208 ormation: e Lincoln LS 2000	who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$2,000.00 Do not deduct secured class amount of any secure Creditors Who Have Clair Current value of the	aims or exemptions. Put ad claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$2,000.00 aims or exemptions. Put ad claims on Schedule D: ms Secured by Property. Current value of the
3. Cars N Y 3.1	me else constants, vans,	Ford Fusion 2010 nate mileage: Lincoln LS 2000 nate mileage:	who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only At least one of the debtors and another	Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property? \$2,000.00 Do not deduct secured of the amount of any secure Creditors Who Have Clair Current value of the entire property?	aims or exemptions. Put ad claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$2,000.00 aims or exemptions. Put ad claims on Schedule D: ms Secured by Property. Current value of the portion you own?
3. Cars N Y 3.1	me else constants, vans, ones Make: Model: Year: Approxim Other info Salvag Make: Model: Year: Approxim Other info	Ford Fusion 2010 nate mileage: Lincoln LS 2000 nate mileage: ormation:	who has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$2,000.00 Do not deduct secured class amount of any secure Creditors Who Have Clair Current value of the entire property? \$2,000.00	aims or exemptions. Put ad claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$2,000.00 aims or exemptions. Put ad claims on Schedule D: ms Secured by Property. Current value of the portion you own?
3. Cars N Y 3.1	me else constants, vans, ones ses ses ses ses ses ses ses ses ses	Ford Fusion 2010 nate mileage: 148,208 ormation: Elincoln LS 2000 nate mileage: ormation:	who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only At least one of the debtors and another Check if this is community property (see instructions) Who has an interest in the property? Check one Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property	Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$2,000.00 Do not deduct secured class the amount of any secure Creditors Who Have Clair Current value of the entire property? \$2,000.00	aims or exemptions. Put ad claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$2,000.00 aims or exemptions. Put ad claims on Schedule D: ms Secured by Property. Current value of the portion you own?

De	ebtor 1	Yolanda Fel	icia Jones		Case number (if known)	
5				your entries from Part 2, including r here		\$4,000.00
Pa	ert 3: Der	scribe Your Perso	onal and Household Items			
			egal or equitable interest in an	y of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.
6.	Example No	old goods and fes: Major appliar Describe	furnishings nces, furniture, linens, china, kitch	enware		dame of exemptions.
			Household Goods			\$2,500.00
_						
7.	■ No	es: Televisions a	and radios; audio, video, stereo, a I phones, cameras, media players	nd digital equipment; computers, pri s, games	inters, scanners; music col	lections; electronic devices
	Li res.	Describe				
8.			I figurines; paintings, prints, or oth ons, memorabilia, collectibles	er artwork; books, pictures, or other	r art objects; stamp, coin, c	r baseball card collections;
	_	Describe				
9.	Example No	ent for sports a es: Sports, photo musical instr	ographic, exercise, and other hobl	by equipment; bicycles, pool tables,	golf clubs, skis; canoes ar	d kayaks; carpentry tools;
10.	■ No		s, shotguns, ammunition, and rela	ated equipment		
11.	□ No		othes, furs, leather coats, designe	er wear, shoes, accessories		
	– 165.	Describe				
			Clothes			\$450.00
12.	□ No		welry, costume jewelry, engagem	ent rings, wedding rings, heirloom je	ewelry, watches, gems, go	ld, silver
			Jewelry			\$25.00
13.	Examp ■ No	rm animals bles: Dogs, cats, Describe	birds, horses			
14	Anv otl	her personal an	nd household items vou did not	already list, including any health	aids you did not list	
	■ No	Give specific inf		and the state of t	you are not not	

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De	ebtor 1	Yolanda	Felicia Jon	es			Case number (if known)	
15						ing any entries for	pages you have attached	\$2,975.00
Pa	rt 4: Des	scribe Your Fi	inancial Asse	ts				
					t in any of the fo	ollowing?		Current value of the portion you own? Do not deduct secured claims or exemptions.
16.	■ No				ır home, in a safe		n hand when you file your petit	ion
			g, savings, o			ates of deposit; shar ne institution, list eac	res in credit unions, brokerage ch.	houses, and other similar
					Institu	tion name:		
			17.1.	Checking	Bank	of America		\$100.00
			17.2.	Savings	Bank	of America		\$25.00
19.	Examp No Ves Non-pu joint ve	oles: Bond fur	nds, investm	Institution or issu	n brokerage firms uer name: orporated and u	, money market acc	sinesses, including an intere	st in an LLC, partnership, and
			Na	me of entity:			% of ownership:	
	Negotia Non-ne ■ No	able instrume egotiable inst	ents include truments are	personal checks, those you canno	cashiers' checks	on-negotiable inst s, promissory notes, eone by signing or c	and money orders.	
21.			sion accoun s in IRA, ERI		k), 403(b), thrift s	avings accounts, or	other pension or profit-sharing	plans
	☐ Yes.	List each acc	count separa Type	tely. of account:	Institu	tion name:		
22.	Your sl Examp ■ No	hare of all un	ents with land	ts you have made	ent, public utilities		or use from a company er), telecommunications compa	nies, or others
	Annuiti ■ No □ Yes	`	·	dic payment of m		er for life or for a nu	umber of years)	
				·				
24.				n an account in and 529(b)(1).	a qualified ABL	E program, or und	ler a qualified state tuition pr	ogram.

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	■ No						
	☐ Yes	Institut	ion name and descript	ion. Separately file the	records of any interests.11 U.S.C.	§ 521(c):	
25.	Trusts, ed	uitable or future	interests in property	(other than anything	listed in line 1), and rights or po	wers exercis	able for your benefit
		ve specific informa	tion about them				
26.	Examples ■ No		names, websites, proc	and other intellectual eeds from royalties and	I property I licensing agreements		
	Examples No				noldings, liquor licenses, profession	nal licenses	
	L Tes. Of	ve specific informa	tion about them				
M	oney or pro	perty owed to yo	u?				Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax refun ■ No	ds owed to you					
	_	e specific informat	tion about them, includ	ling whether you alread	dy filed the returns and the tax year	rs	
29.	Family su Examples ■ No		sum alimony, spousa	l support, child support	r, maintenance, divorce settlement,	, property settl	ement
	☐ Yes. Giv	e specific informat	ion				
30.	Examples				its, sick pay, vacation pay, worker	s' compensation	on, Social Security
	■ No	:::: :	#! a.a				
	☐ Yes. Gi	ve specific informa	ition				
31.		in insurance police: Health, disability,		Ith savings account (HS	SA); credit, homeowner's, or renter	r's insurance	
		me the insurance of	company of each policy	y and list its value.			
			Company name:		Beneficiary:		Surrender or refund value:
32.		the beneficiary of		meone who has died roceeds from a life insu	rance policy, or are currently entitl	led to receive	property because
	☐ Yes. Gi	ve specific informa	tion				
33.				u have filed a lawsuit of ance claims, or rights to	or made a demand for payment o sue		
	☐ Yes. De	escribe each claim.					
34.	Other con	tingent and unliq	uidated claims of eve	ery nature, including	counterclaims of the debtor and	rights to set	off claims
	☐ Yes. De	escribe each claim.					
35.	_ `	cial assets you di	id not already list				
	■ No □ Yes. Gi	ve specific informa	tion				

Debto	Yolanda Felicia Jones		Case number (if known)	
	Add the dollar value of all of your entries from Part 4, including for Part 4. Write that number here			\$125.00
Part 5	: Describe Any Business-Related Property You Own or Have an Intere	est In. List any real esta	ate in Part 1.	
37. Do	you own or have any legal or equitable interest in any business-relate	ed property?		
	No. Go to Part 6.			
	Yes. Go to line 38.			
Part 6	Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	Own or Have an Interes	st In.	
46. D	o you own or have any legal or equitable interest in any farm-	or commercial fishin	ng-related property?	
	No. Go to Part 7.			
	Yes. Go to line 47.			
Part 7	Describe All Property You Own or Have an Interest in That You	Did Not List Above		
	o you have other property of any kind you did not already list? Examples: Season tickets, country club membership	?		
	No			
	Yes. Give specific information			
	'			
54.	Add the dollar value of all of your entries from Part 7. Write tha	at number here		\$0.00
Part 8	List the Totals of Each Part of this Form			_
55. I	Part 1: Total real estate, line 2			\$0.00
56. I	Part 2: Total vehicles, line 5	\$4,000.00		
57. I	Part 3: Total personal and household items, line 15	\$2,975.00		
58. I	Part 4: Total financial assets, line 36	\$125.00		
59. I	Part 5: Total business-related property, line 45	\$0.00		
60. I	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61. I	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$7,100.00	Copy personal property total	\$7,100.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$7,100.00

Fill in this infor	mation to identify ye	our case:		
Debtor 1	Yolanda Felici			
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for th	e: EASTERN DISTRICT C	DF ARKANSAS	
Case number (if known)				☐ Check if this is an amended filing
	orm 106C			
Schodul		Dranarty Vali (Claim as Exempt	4/10

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

	Which set of exemptions are you claiming	? Check one only, ever	n if yo	ur spouse is filing with you.	
	☐ You are claiming state and federal nonban	kruptcy exemptions. 1	11 U.S	S.C. § 522(b)(3)	
	■ You are claiming federal exemptions. 11 l	J.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	mpt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	, , , , , ,	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	2010 Ford Fusion 148,208 miles Salvage	\$2,000.00		\$2,000.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
	2000 Lincoln LS Line from Schedule A/B: 3.2	\$2,000.00		\$2,000.00	11 U.S.C. § 522(d)(2)
	Line from Scriedule A/B. 3.2			100% of fair market value, up to any applicable statutory limit	
	Household Goods Line from Schedule A/B: 6.1	\$2,500.00	•	\$2,500.00	11 U.S.C. § 522(d)(3)
	Line Hom Schedule AVB. 0.1			100% of fair market value, up to any applicable statutory limit	
	Clothes Line from Schedule A/B: 11.1	\$450.00		\$450.00	11 U.S.C. § 522(d)(3)
	Line nom <i>Schedule AVD</i> . 11.1			100% of fair market value, up to any applicable statutory limit	
	Jewelry Line from Schedule A/B: 12.1	\$25.00	-	\$25.00	11 U.S.C. § 522(d)(4)

100% of fair market value, up to any applicable statutory limit

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Debt	tor 1 Yolanda Felicia Jones			Case number (if known)	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	Checking: Bank of America	\$100.00		\$100.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
	Savings: Bank of America Line from Schedule A/B: 17.2	\$25.00		\$25.00	11 U.S.C. § 522(d)(5)
	LINE HOLL Schedule AVB. 17.2			100% of fair market value, up to any applicable statutory limit	
	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every No Yes. Did you acquire the property cover No Yes	3 years after that for ca	ises f	,	,

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mation to identify your	case:		
Yolanda Felicia J	ones		
First Name	Middle Name	Last Name	
First Name	Middle Name	Last Name	
ankruptcy Court for the:	EASTERN DISTRICT O	F ARKANSAS	
			☐ Check if this is an amended filing
	Yolanda Felicia J First Name First Name	First Name Middle Name	Yolanda Felicia Jones First Name Middle Name Last Name First Name Middle Name Last Name

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

4.	13-0K-11400 DOG	#. I I IICC	1. 03/13/13	Lintereu	. 03/19/1	9 10.33.49 Fage	10 01 39	
Fill in this in	formation to identify your o	case:						
Debtor 1	Yolanda Felicia Jo	onos						
Debior 1	First Name	Middle Nan	ne	Last Name				
Debtor 2								
(Spouse if, filing)	First Name	Middle Nar	ne	Last Name				
United States	Bankruptcy Court for the:	EASTERN DI	STRICT OF ARK	ANSAS				
Case number								
(if known)							check if this is a	an
						a	mended filing	
Official Ed	orm 106E/F							
		lba Havra I	lung and and	Claima			40/4	I E
	E E/F: Creditors W and accurate as possible. Use						12/1	
Schedule D: Creleft. Attach the name and case	secutory Contracts and Unexpi editors Who Have Claims Secu Continuation Page to this pag number (if known). st All of Your PRIORITY Un	ured by Property je. If you have no	r. If more space is in information to rep	needed, copy t	he Part you ne	eed, fill it out, number the en	tries in the boxe	es on the
_ `	editors have priority unsecured	u ciaiilis agailist	your					
■ No. Go	to Part 2.							
Yes.	All of Vous MONDDIODIT	W I I 1 (Nai					
	st All of Your NONPRIORIT							
3. Do any cre	editors have nonpriority unsec	cured claims aga	inst you?					
☐ No. You	u have nothing to report in this pa	art. Submit this fo	rm to the court with	your other sche	edules.			
Yes.								
unsecured	your nonpriority unsecured cla claim, list the creditor separately reditor holds a particular claim, li	y for each claim. F	or each claim listed	, identify what ty	ype of claim it is	s. Do not list claims already inc	cluded in Part 1.	If more
							Total claim	
4.1 Arka	insas Pathology	L	ast 4 digits of acc	ount number	8420			\$12.75
Nonpr	iority Creditor's Name							
_	100559	١	Vhen was the debt	incurred?			-	
	ence, SC 29502-0559 er Street City State Zip Code		As of the date you t	file, the claim is	s: Check all tha	at apply		
	ncurred the debt? Check one.		, , , , , , , , , , , , , , , , , , , ,	,				
■ De	ebtor 1 only	1	☐ Contingent					
□ De	ebtor 2 only		☐ Unliquidated					
	ebtor 1 and Debtor 2 only		Disputed					
_	least one of the debtors and and	_	ype of NONPRIOR	ITY unsecured	l claim:			
	neck if this claim is for a comm	J. 101	Student loans					
debt		. ا			ration agreeme	nt or divorce that you did not		
_	claim subject to offset?		eport as priority clai					
■ No)		Debts to pension		g plans, and oth	ner similar debts		
☐ Ye	s	ı	Other. Specify	Medical			_	

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Debto	r 1 Yolanda Felicia Jones	Case number (if known)	
4.2	AT&T Nonpriority Creditor's Name	Last 4 digits of account number 7714	\$189.27
	P.O. Box 1259 Oaks, PA 19456	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Services	
4.3	AT&T Wireless	Last 4 digits of account number 3644	\$2,479.80
	Nonpriority Creditor's Name 300 S. University Ave Little Rock, AR 72205	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	☐ Yes	■ Other. Specify Services	
4.4	AXPM Dental Management Nonpriority Creditor's Name	Last 4 digits of account number	\$800.00
	West Rock Orthodontics 5100 Talley Rd., Ste. 1 Little Rock, AR 72204	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Dental	

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Last 4 digits of account number 3523	\$485.86 \$72.76
PO Box 71083	\$72.76
Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Pes Carol Wright Gifts Nonpriority Creditor's Name PO Box 2852 Monroe, WI 53566 Number Street City State Zip Code Who incurred the debt? Check one. As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply As of the date you file, the claim is: Check all that apply	\$72.76
□ Debtor 1 only □ Contingent □ Debtor 2 only □ Disputed □ Disputed □ Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Yes □ Other. Specify Credit □ Carol Wright Gifts □ Carol Wright Gifts □ Carol Wrode Green Street City State Zip Code Who incurred the debt? Check one. □ Debts 1 only □ Contingent □ Contingent □ Contingent □ Debts 1 only □ Contingent □ Debts 1 only □ Contingent □ Contingent □ Contingent □ Debts 1 only □ Contingent □ Contingent □ Contingent □ Debts 1 only □ Contingent □ Contingent □ Debts 1 only □ Contingent □ Contingen	\$72.76
□ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Yes □ Other. Specify Credit At least one of the debtors and another □ Check if this claim is for a community debt □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Yes □ Other. Specify Credit At least 4 digits of account number □ Carol Wright Gifts □ Carol Wright Gifts □ Nonpriority Creditor's Name □ Debtor 1 only □ Contingent □ Contingent □ Contingent □ Contingent □ Contingent □ Debtor 1 only □ Contingent □ Contingent □ Debtor 1 only □ Contingent □ Debtor 1 only □ Contingent □ Contingent □ Contingent □ Contingent □ Debtor 1 only □ Debtor 1 only □ Contingent □ Debtor 1 only □ Debtor 1	\$72.76
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt Is the claim subject to offset? □ No □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Yes □ Other. Specify □ Credit Last 4 digits of account number 41A4 When was the debt incurred? As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. □ Debtor 1 only □ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Credit □ Credit □ When was the debt incurred? □ As of the date you file, the claim is: Check all that apply □ Contingent	\$72.76
☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim: ☐ Check if this claim is for a community debt ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ☐ Other. Specify Credit 4.6 Carol Wright Gifts Last 4 digits of account number PO Box 2852 Monroe, WI 53566 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent	\$72.76
Check if this claim is for a community debt Is the claim subject to offset? □ No □ Debts to pension or profit-sharing plans, and other similar debts □ Yes □ Other. Specify Credit Last 4 digits of account number 41A4 Nonpriority Creditor's Name PO Box 2852 Monroe, WI 53566 Number Street City State Zip Code Who incurred the debt? Check one. □ Debtor 1 only □ Contingent	\$72.76
debt Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts The claim subject to offset? The claim subject	\$72.76
Is the claim subject to offset? No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Last 4 digits of account number PO Box 2852 Monroe, WI 53566 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Contingent	\$72.76
4.6 Carol Wright Gifts Nonpriority Creditor's Name PO Box 2852 Monroe, WI 53566 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Carol Wright Gifts Last 4 digits of account number 41A4 When was the debt incurred? As of the date you file, the claim is: Check all that apply	\$72.76
4.6 Carol Wright Gifts Nonpriority Creditor's Name PO Box 2852 Monroe, WI 53566 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Last 4 digits of account number 41A4 When was the debt incurred? As of the date you file, the claim is: Check all that apply	\$72.76
Nonpriority Creditor's Name PO Box 2852 Monroe, WI 53566 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Who incurred the debt? Check one.	\$72.76
Monroe, WI 53566 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent	
Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only As of the date you file, the claim is: Check all that apply Contingent	
Who incurred the debt? Check one. ■ Debtor 1 only □ Contingent	
☐ Debtor 2 only ☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only ☐ Disputed	
☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community ☐ Student loans	
debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No □ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes ☐ Other. Specify Credit	
4.7 CBCS Last 4 digits of account number 5751	\$62.94
Nonpriority Creditor's Name P.O. Box When was the debt incurred?	·
Columbus, OH 43216	
Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one.	
■ Debtor 1 only □ Contingent	
☐ Debtor 2 only ☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only ☐ Disputed	
☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community ☐ Student loans	
debt ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No □ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes ☐ Other. Specify Utility	

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Debto	Yolanda Felicia Jones	Case number (if known)	
4.8	Centerpoint Energy	Last 4 digits of account number 4928	\$62.94
	Nonpriority Creditor's Name P.O. Box 4583	When was the debt incurred?	
	Houston, TX 77210 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Continued	
	Debtor 2 only	☐ Contingent ☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
		report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	Yes	Other. Specify Utility	
4.9	Central Arkansas Water Nonpriority Creditor's Name	Last 4 digits of account number 8307	\$377.47
	221 East Capitol Ave. Little Rock, AR 72203	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Utility	
		0176;0147;0	
4.1 0	CHI St. Vincent	Last 4 digits of account number 084	\$58.05
	Nonpriority Creditor's Name P.O. Box 1259 Dept. 141529	When was the debt incurred?	
	Oaks, PA 19456 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Medical	
	□ 162	Utner. Specify	

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Debt	or 1 Yolanda Felicia Jones	Case number (if known)	
4.1 1	CHI St. Vincent	0182;6784;3 Last 4 digits of account number 410	\$48.90
	Nonpriority Creditor's Name PO Box 677243	When was the debt incurred?	
	Dallas, TX 75267 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	□ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.1 2	CHI St. Vincent	Last 4 digits of account number 6784	\$195.75
	Nonpriority Creditor's Name P.O. Box 23410 Little Rock, AR 72221	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Medical	
4.1	Commenity/Lane Bryant	Last 4 digits of account number 0786	\$766.00
3	Nonpriority Creditor's Name		*******
	P.O. Box 659729	When was the debt incurred?	
	San Antonio, TX 78265 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	The of the state year me, the claim for check an that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	☐ Yes	Other. Specify Credit	

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Debtor	1 Yolanda Felicia Jones	Case number (if known)	
4.1	Country Door	Last 4 digits of account number 2530	¢20.64
4	Country Door Nonpriority Creditor's Name	Last 4 digits of account number 2530	\$29.64
	1112 Seventh Ave. Monroe, WI 53566	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacktriangle Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit	
4.1	Credit One	Last 4 digits of account number 9515	\$765.20
<u> </u>	Nonpriority Creditor's Name		<u> </u>
	PO Box 60500	When was the debt incurred?	
	City of Industry, CA 91716-0500 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dam is. Oneon an that apply	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit	
4.1	Credit One	Last 4 digits of account number 8876	\$1,136.44
	Nonpriority Creditor's Name		
	PO Box 60500	When was the debt incurred?	
	City of Industry, CA 91716-0500 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	• , , , , , , , , , , , , , , , , , , ,	
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit	

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Debtor	1 Yolanda Felicia Jones	Case number (if known)	
4.1	ERC	Last 4 digits of account number 3013	\$189.27
7	Nonpriority Creditor's Name POB 23870	Last 4 digits of account number 3013 When was the debt incurred?	φ109.27
	Jacksonville, FL 32241	when was the dept incurred:	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	□ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Collection for AT&T	
		— Other. Specify	
4.1		7007	A70.47
8	Fidelity Nonpriority Creditor's Name	Last 4 digits of account number 7007	\$73.47
	19863 I-30, Suite B	When was the debt incurred?	
	Benton, AR 72015 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dam is. Offeck all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Services	
41			
9	Fingerhut	Last 4 digits of account number 4953	\$3,667.44
	Nonpriority Creditor's Name P.O. Box 70281	When was the debt incurred?	
	Philadelphia, PA 19176-0281		
4.1	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not	
	No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit	

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Debto	Yolanda Felicia Jones	Case number (if known)	
4.2	Canaral Sarvice Bureau Inc	4070	¢40.24
0	General Service Bureau, Inc. Nonpriority Creditor's Name	Last 4 digits of account number 1070	\$18.34
	P.O. Box 641579 Omaha, NE 68164	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.2			
1	General Service Bureau, Inc.	Last 4 digits of account number	\$47.23
	Nonpriority Creditor's Name P.O. Box 641579	When was the debt incurred?	
	Omaha, NE 68164 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dbligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Medical	
4.2	L. P O I	0.470	4000.40
2	Indigo Card Nonpriority Creditor's Name	Last 4 digits of account number 0472	\$323.10
	P.O. Box 23039	When was the debt incurred?	
	Columbus, GA 31902		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	Contingent	
	Debtor 2 only	Unliquidated	
	☐ Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	□ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes		
	□ 169	■ Other. Specify Credit	

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Debtor	1 Yolanda Felicia Jones	Case number (if known)	
4.2			*
3	Kohls	Last 4 digits of account number 7454	\$683.82
	Nonpriority Creditor's Name PO Box 2983	When was the debt incurred?	
	Milwaukee, WI 53201	when was the dept incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	_	_ '	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt		
	Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify Credit	
4.2	Mason	Last 4 digits of account number 7322	\$579.00
4	Nonpriority Creditor's Name	Last 4 digits of account number 7322	Ψ373.00
	P.O. Box 2802	When was the debt incurred?	
	Monroe, WI 53566-8008		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Credit	
4.2 5	Mason Companies	Last 4 digits of account number 21A2	\$455.00
	Nonpriority Creditor's Name		
	1251 1st Avenue	When was the debt incurred?	
	Chippewa Falls, WI 54729 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	As of the date you me, the dam's. Onesk an that apply	
	■ Debtor 1 only	Operation and	
	_	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	Other. Specify Credit	

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Debto	Yolanda Felicia Jones	Case number (if known)	
4.2			
6	Merrick Bank	Last 4 digits of account number 5500	\$1,023.91
	Nonpriority Creditor's Name POB 660702	When was the debt incurred?	
	Dallas, TX 75266	When was the debt incurred:	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	_	☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit	
	00	— Otter. Specify	
4.2	Montgomery Ward	Last 4 digits of account number 2290	\$715.96
7	Nonpriority Creditor's Name		Ψ110.00
	1112 7th Avenue	When was the debt incurred?	
	Monroe, WI 53566-1364		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit	
4.2			
8	North Little Rock Women's Cl	Last 4 digits of account number 4009	\$13.48
	Nonpriority Creditor's Name 3401 Springhill Dr., Ste. 390	When was the debt incurred?	
	North Little Rock, AR 72117	When was the dept incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other Specify Medical	
	_ 100	— Other, Specify	

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Debto	Yolanda Felicia Jones	Case number (if known)	
4.2	Progressive Leasing	Last 4 digits of account number 5630	\$542.60
9	Nonpriority Creditor's Name 256 W. Data Drive	Last 4 digits of account number 5030 When was the debt incurred?	Ψ342.00
	Draper, UT 84020		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	□ Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Furniture	
	2 .00	Other: Specify	
4.3			
0	Radiology Associates Nonpriority Creditor's Name	Last 4 digits of account number PA-RA	\$13.89
	PO Box 8801	When was the debt incurred?	
	Little Rock, AR 72231		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes		
	T les	Other. Specify Medical	
4.3			
1	Seventh Ave	Last 4 digits of account number 1002	\$476.06
	Nonpriority Creditor's Name P.O. Box 2804	When was the debt incurred?	
	Monroe, WI 53566		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	\square Check if this claim is for a community	Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	<u> </u>	□ Debts to pension or profit-sharing plans, and other similar debts	
	■ No		
	☐ Yes	■ Other. Specify Credit	

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Savanth Avanua		¢524.27
	Last 4 digits of account number	\$531.37
1112 7th Ave.	When was the debt incurred?	
Monroe, WI 53566-1364		
	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit	
Ourie (Windows	0407	\$0.070.40
•	Last 4 digits of account number	\$2,072.40
	When was the debt incurred?	
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Services	
St. Vincent Infirmery		\$1,288.00
-	Last 4 digits of account number	Ψ1,200.00
	When was the debt incurred?	
Birmingham, AL 35283		
Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	☐ Contingent	
Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
☐ Check if this claim is for a community	☐ Student loans	
debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	Other. Specify Medical	
	Monroe, WI 53566-1364 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes Sprint Wireless Nonpriority Creditor's Name P.O. Box 4191 Carol Stream, IL 60197 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes St. Vincent Infirmary Nonpriority Creditor's Name P.O. Box 830913 Birmingham, AL 35283 Number Street City State Zip Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 only Debtor 4 only Check if this claim is for a community debt Least one of the debtors and another Check if this claim is for a community debt Least one of the debtors and another Check if this claim is for a community debt Least one of the debtors and another Check if this claim is for a community debt Least one of the debtors and another Check if this claim is for a community debt Least one of the debtors and another Check if this claim is for a community debt Least one of the debtors and another Check if this claim is for a community debt Least one of the debtors and another	Nonpriority Creditor's Name 1112 7th Ave. When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply When was the debt incurred? As of the date you file, the claim is: Check all that apply Contingent Debtor 2 only Debtor 2 only Debtor 2 only Debtor 2 only Debtor 3 and Debtor 2 only Debtor 4 and Debtor 2 only Debtor 5 and Debtor 2 only Debtor 5 and Debtor 5 only Debtor 5 and Debtor 6 and Debtor 6 and Debtor 8 and 10 and

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Debto	Yolanda Felicia Jones	Case number (if known)	
4.3	_		****
5	Surge	Last 4 digits of account number	\$462.10
	Nonpriority Creditor's Name POB 6812	When was the debt incurred?	
	Carol Stream, IL 60197		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	\square Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Credit	
4.3			
6	Total Card Inc.	Last 4 digits of account number 3013	\$462.50
	Nonpriority Creditor's Name PO Box 89725	When was the debt incurred?	
	Sioux Falls, SD 57109	when was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		☐ Student loans	
	☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Student Loan	
4.3	Verizon Wireless	Last 4 digits of account number 0001	£4 224 77
7	Nonpriority Creditor's Name	Last 4 digits of account number UUU1	\$1,321.77
	P.O. Box 408	When was the debt incurred?	
	Newark, NJ 07101		
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Services	
		· •	

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Debtor	1 Yolanda	Felicia Jones		Case n	number (if known)	
4.3 8	Verve		Last 4 digits of account number	8045	5	\$1,073.32
	P.O. Box 68		When was the debt incurred?			
-	Number Street	City State Zip Code the debt? Check one.	As of the date you file, the claim	i s: Chec	ck all that apply	
	■ Debtor 1 on	lv	☐ Contingent			
	Debtor 2 on	•	☐ Unliquidated			
	Debtor 1 an		☐ Disputed			
		of the debtors and another	Type of NONPRIORITY unsecured	d claim:	:	
	_	is claim is for a community	☐ Student loans			
	debt	bject to offset?	Obligations arising out of a separeport as priority claims	ration a	greement or divorce that you did not	
	■ No	•	Debts to pension or profit-sharin	a plans.	and other similar debts	
	☐ Yes		■ Other. Specify Credit			
4.3	Victoria's S	ecret	Last 4 digits of account number	6708	R	\$318.05
9	Nonpriority Cre		Last 4 digits of account number		<u> </u>	φ310.03
	PO Box 182 Columbus,	2118	When was the debt incurred?			
		City State Zip Code the debt? Check one.	As of the date you file, the claim i	i s: Chec	ck all that apply	
	Debtor 1 on	ly	☐ Contingent			
	Debtor 2 on	ly	☐ Unliquidated			
	Debtor 1 an	d Debtor 2 only	☐ Disputed			
	☐ At least one	of the debtors and another	Type of NONPRIORITY unsecured	d claim:	:	
	☐ Check if thi	is claim is for a community	☐ Student loans			
	debt Is the claim su	bject to offset?	Obligations arising out of a separeport as priority claims	ration a	greement or divorce that you did not	
	■ No		Debts to pension or profit-sharing	g plans,	, and other similar debts	
	☐ Yes		Other. Specify Credit			
Part 3:	List Others	s to Be Notified About a Debt	That You Already Listed			
is tryir have n	ng to collect fro nore than one o	m you for a debt you owe to som	out your bankruptcy, for a debt that y leone else, list the original creditor in you listed in Parts 1 or 2, list the addi submit this page.	Parts 1	1 or 2, then list the collection agency	here. Similarly, if you
Part 4:		mounts for Each Type of Uns	ecured Claim s. This information is for statistical re	enortine	g nurnoses only 28 U.S.C. 8159. Add	the amounts for each
	f unsecured cla			- -	g p poode oy. 20 o.o.o. 3.000	
		Barrier and a second of the officer			Total Claim	
	6a. Fotal aims	Domestic support obligations		6a.	\$ 0.00	-
from Pa	art 1 6b.	Taxes and certain other debts	ou owe the government	6b.	\$0.00	_
	6c.		jury while you were intoxicated	6c.	\$ 0.00	-
	6d.	Other. Add all other priority unse	cured claims. Write that amount here.	6d.	\$	-
	6e.	Total Priority. Add lines 6a throu	gh 6d.	6e.	\$	-
					Total Claim	
	6f. Fotal aims	Student loans		6f.	\$	-
from Pa			paration agreement or divorce that	6~	\$ 0.00	
	6h.	you did not report as priority of Debts to pension or profit-shar	aims ing plans, and other similar debts	6g. 6h.	\$ 0.00	-
			- · · · · ·		. 0.00	

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Debtor 1 Yolanda Felicia Jones

Case number (if known)

 Other. Add all other nonpriority unsecured claims. Write that amount here. i. \$ 23,895.85

6j. Total Nonpriority. Add lines 6f through 6i.

6j. \$ **23,895.85**

Fill in this infor	mation to identify your	case:		
Debtor 1	Yolanda Felicia J	ones		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F ARKANSAS	
Case number				
(if known)				☐ Check if this
				amended fili

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have the r, Street, City, State and ZIP	e contract or lease	State what the contract or lease is for
2.1		· · · · · · · · · · · · · · · · · · ·	· · · · ·		
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.2	•				
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	<u> </u>
2.4					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.5					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>

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Fill in this	s information to identify your	case:			
Debtor 1	Yolanda Felicia	Jones			
Dahtano	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fi	ing) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	EASTERN DISTRICT C	F ARKANSAS		
Case num	her				
(if known)					Check if this is an
					amended filing
Officia	l Form 106H				
	dule H: Your Coc	lobtoro			40/45
Sche	dule n. Your Cod	eptors			12/15
fill it out, a	and number the entries in the e and case number (if known	e boxes on the left. Attach). Answer every question	n the Additional Page to 	ion. If more space is needed, cop o this page. On the top of any Ac	
1. Do	you have any codebtors? (If	you are filing a joint case,	do not list either spouse	as a codebtor.	
■ No					
Arizo	thin the last 8 years, have yo na, California, Idaho, Louisiana . Go to line 3. s. Did your spouse, former spo	ı, Nevada, New Mexico, Pu	erto Rico, Texas, Washi	y? (Community property states and ngton, and Wisconsin.)	d territories include
in lin Form	e 2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	if your spouse is filing with you. sure you have listed the creditor 6G). Use Schedule D, Schedule I	on Schedule D (Official
	Column 1: Your codebtor Name, Number, Street, City, State and 2	ZIP Code		Column 2: The creditor to whe Check all schedules that apply	
3.1	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line ☐ Schedule G, line	
	Normalis and Otropot				
	Number Street City	State	ZIP Code		
3.2	Name			☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line ☐	
	Number Street City	State	ZIP Code	_	

Fill	in this information to identify your ca	ase:										
Del	otor 1 Yolanda Fel	_										
1 -	btor 2 puse, if filing)				_							
Uni	ited States Bankruptcy Court for the	EASTERN DISTRICT	OF ARKANSAS		_							
Case number						Check if this is:						
(If kr	nown)				☐ An amended filing							
					⊔			ng postpetition following date:				
0	fficial Form 106I							g				
-	chedule I: Your Inc	ome				MM / DD/ YYYY 12/15						
sup spo atta	as complete and accurate as possible plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	are married and not fili ir spouse is not filing w	ng jointly, and your s ith you, do not includ	pouse is le inform	living wi	ith you, incout your sp	lude infor ouse. If m	mation about nore space is	t your needed,			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse								
	If you have more than one job,		☐ Employed	☐ Employed								
	attach a separate page with information about additional employers.	Employment status	■ Not employed			☐ Not employed						
	Include part-time, seasonal, or	Occupation										
	self-employed work.	Employer's name										
	Occupation may include student or homemaker, if it applies.	Employer's address										
		How long employed t	here?									
Par	t 2: Give Details About Mor	nthly Income										
	mate monthly income as of the duse unless you are separated.	ate you file this form. If	you have nothing to re	port for a	ny line, w	rite \$0 in the	e space. In	nclude your no	n-filing			
	ou or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	for all en	nployers f	or that pers	on on the l	lines below. If	you need			
					For I	Debtor 1		ebtor 2 or ling spouse				
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$	0.00	\$	N/A	-			
3.	Estimate and list monthly overt	ime pay.		3.	+\$	0.00	+\$	N/A	-			
1	Calculate gross Income Add lin	ne 2 ± line 3		4	\$	0.00	\$	NI/A				

Debtor 1		Yolanda Felicia Jones	-	C	Case number (if known)					
					For Debtor 1			Debtor		
	Сор	y line 4 here	4.		\$	0.00	\$_		N/A	_
5.	List	all payroll deductions:								
	5a. 5b. 5c.	Tax, Medicare, and Social Security deductions Mandatory contributions for retirement plans Voluntary contributions for retirement plans	5a. 5b. 5c.		\$	0.00 0.00 0.00	\$_ \$_ \$_		N/A N/A N/A	
	5d. 5e. 5f. 5g.	Required repayments of retirement fund loans Insurance Domestic support obligations Union dues	5d. 5e. 5f. 5g.		\$	0.00 0.00 0.00 0.00	\$_ \$_ \$_		N/A N/A N/A	<u> </u>
	5h.	Other deductions. Specify:	_ 5h.			0.00	+ \$_		N/A	_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.			0.00	\$_		N/A	_
7. 8.		all other income regularly received: Net income from rental property and from operating a business, profession, or farm	7.	;	\$(0.00	\$_		N/A	<u>-</u>
	8b.	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. Interest and dividends	8a. 8b.			0.00	\$_ \$_		N/A N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.		. —	0.00	\$_		N/A	_
	8d. 8e.	Unemployment compensation Social Security	8d. 8e.		\$ 1,15s	0.00	\$_ \$		N/A N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:				0.00	\$		N/A	_
	8g.	Pension or retirement income	8g.		·	0.00	\$_		N/A	_
	8h.	Other monthly income. Specify: Family Assistance	_ 8h.	.+	\$ 50	0.00	+ \$_		N/A	_
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	1,65	9.00	\$_		N/	A
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$_	1,659.00	+ \$_		N/A	= \$ _	1,659.00
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your refriends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	depe		. ,				e J. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies						12.	\$	1,659.00
13.	Do y	you expect an increase or decrease within the year after you file this form	?						Combi month	ned ly income
		No. Yes. Explain:								

		ion to intentify				1		
	in this informat	ion to identify yo	our case.					
Deb	tor 1	Yolanda Feli	cia Jone	S			ck if this is:	
Dob	tor 2						An amended filing	Zanasata at Colonialian tan
	ouse, if filing)						A supplement snow 13 expenses as of t	ving postpetition chapter the following date:
						_		
Unit	ed States Bankru	uptcy Court for the	EASTE	RN DISTRICT OF ARKA	NSAS		MM / DD / YYYY	
Cas	e number							
1	nown)							
Of	fficial Fo	rm 106.I						
			 Evnor					
		J: Your			Cli ((b b	- 41	-11	12/15
info	rmation. If mo		eded, atta	If two married people another sheet to this n.				
Par	Descri	ibe Your House	hold					
1 ai	Is this a join		iloiu					
	■ No. Go to	line 2						
			in a separ	ate household?				
	□ No		•					
	=		st file Offici	al Form 106J-2, Expense	es for Separate House	hold of Deb	tor 2.	
2			_	•	•			
2.	•	dependents?	☐ No					
	Do not list De Debtor 2.	ebtor 1 and	Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?
	Do not state	the						□ No
	dependents r				Daughter		20	■ Yes
								□ No
								Yes
								□ No
								☐ Yes ☐ No
								☐ Yes
3.	Do your exp	enses include		No				— 103
		people other to your depende	han $_{f \sqcap}$	Yes				
	<u> </u>			_				
Par		ate Your Ongoi		y Expenses uptcy filing date unless	vou are using this f	orm 26 2 611	nnlement in a Cha	nter 13 case to report
exp								f the form and fill in the
Incl	ude expenses	s paid for with i	non-cash	government assistance	e if you know			
				luded it on Schedule I:			V	
(Off	ficial Form 10	6I.)					Your expe	enses
4.				ses for your residence	. Include first mortgage	e 4. \$		625.00
	payments an	d any rent for the	e ground o	r iot.		→. ↓	·	
	If not include							
		state taxes	or roste	de incurance		4a. \$		0.00
	•	ty, homeowner's maintenance re	•	's insurance ipkeep expenses		4b. \$ 4c. \$		0.00 0.00
		owner's associat	•			4d. \$		0.00
5.				our residence, such as h	nome equity loans	5. \$		0.00

Debtor 1	Yolanda Felicia Jones	Case num	ber (if known)	
6. Utiliti	es:			
6a.	Electricity, heat, natural gas	6a.	\$	190.00
6b.	Water, sewer, garbage collection	6b.	\$	60.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	200.00
6d.	Other. Specify:	6d.	\$	0.00
Food	and housekeeping supplies		\$	217.00
Child	care and children's education costs	8.	\$	0.00
Cloth	ing, laundry, and dry cleaning	9.	\$	50.00
). Perso	onal care products and services	10.	\$	50.00
1. Medi	cal and dental expenses	11.	\$	50.00
	sportation. Include gas, maintenance, bus or train fare.			400.00
	ot include car payments.	12.	\$	100.00
3. Enter	tainment, clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
l. Chari	itable contributions and religious donations	14.	\$	0.00
5. Insur				
	ot include insurance deducted from your pay or included in lines 4 or 20.			
	Life insurance	15a.	·	0.00
	Health insurance	15b.		0.00
	Vehicle insurance	15c.	·	82.00
	Other insurance. Specify: Rental	15d.	\$	35.00
	s. Do not include taxes deducted from your pay or included in lines 4 or 20.			
Speci	•	16.	\$	0.00
	Ilment or lease payments:	47	•	
	Car payments for Vehicle 1	17a.	·	0.00
	Car payments for Vehicle 2	17b.	·	0.00
	Other. Specify:	17c.	\$	0.00
	Other. Specify:	17d.	\$	0.00
3. Your	payments of alimony, maintenance, and support that you did not report as	18.	\$	0.00
	cted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	10.	\$	
	r payments you make to support others who do not live with you.	10	Ф	0.00
Speci	ny. r real property expenses not included in lines 4 or 5 of this form or on Sche	19.	ur Incomo	
	Mortgages on other property	20a.		0.00
	Real estate taxes	20b.		0.00
	Property, homeowner's, or renter's insurance	20b. 20c.	·	0.00
		20d.	· .	
	Maintenance, repair, and upkeep expenses Homeowner's association or condominium dues	20u. 20e.	·	0.00
			·	0.00
l. Other	r: Specify:	21.	+\$	0.00
2. Calcu	ulate your monthly expenses			
	Add lines 4 through 21.		\$	1,659.00
22b. (Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	Add line 22a and 22b. The result is your monthly expenses.		\$	1,659.00
220.7	tad iiilo 22a and 22b. Tho robatt to your monthly expenses.		Ψ	1,039.00
3. Calcu	ulate your monthly net income.			
23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	1,659.00
23b.	Copy your monthly expenses from line 22c above.	23b.	-\$	1,659.00
				<u> </u>
23c.	Subtract your monthly expenses from your monthly income.		<u></u>	0.00
	The result is your monthly net income.	23c.	\$	0.00
For ex	ou expect an increase or decrease in your expenses within the year after your cample, do you expect to finish paying for your car loan within the year or do you expect you cation to the terms of your mortgage?			or decrease because of a
■ No),			
— No				

Fill in thi	is informa	tion to identify your	case:					
Debtor 1		Yolanda Felicia J	ones					
		First Name	Middle Name	Las	t Name			
Debtor 2								
(Spouse if, f	filing)	First Name	Middle Name	Las	t Name			
United St	tates Bank	ruptcy Court for the:	EASTERN DISTRICT O	F ARKANS	AS			
Case nur	mber						_ ~	
(if known)								neck if this is an nended filing
		106Dec	n Individual	Dobt	orio Sobo	dulac		
Deci	aratio	on About a	n Individual	Debt	or s Sche	aules		12/15
years, or	Sign E	J.S.C. §§ 152, 1341, 1 Below	519, and 3571.					
Did	you pay o	or agree to pay some	one who is NOT an attor	ney to help	you fill out bankr	uptcy forms?		
	No							
	Yes. Na	me of person						n Preparer's Notice, re (Official Form 119)
that	they are to /s/ Yolan	of perjury, I declare rue and correct. da Felicia Jones Felicia Jones	that I have read the sum	mary and s	chedules filed with		ion and	
		of Debtor 1			Signature of Debtt	л ∠		
	Date Ma	rch 19, 2019			Date			

Fill	in this infor	mation to identify you	ur case:			
Deb	otor 1	Yolanda Felicia	Jones			
		First Name	Middle Name	Last Name		
	otor 2 use if, filing)	First Name	Middle Name	Last Name		
Uni	ted States Ba	ankruptcy Court for the	: EASTERN DISTRICT OF	ARKANSAS		
	se number own)					Check if this is an amended filing
Sta Be a info	atement as complete rmation. If r	and accurate as poss nore space is needed	Affairs for Indivi-	are filing together, both are	equally responsible for su	
		n). Answer every que Details About Your M	estion. Iarital Status and Where Yo	ı Lived Before		
1.		ır current marital stat				
	_					
	☐ Married					
	■ Not ma	irried				
2.	During the	last 3 years, have you	u lived anywhere other than	where you live now?		
	■ No					
	☐ Yes. Li	st all of the places you	lived in the last 3 years. Do n	ot include where you live now	٧.	
	Debtor 1 P	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	ddress:	Dates Debtor 2 lived there
3. state			ever live with a spouse or le alifornia, Idaho, Louisiana, Ne			
olate	oo ana tormo	Too morado 7 mzoria, O	amorria, idario, Eddidiaria, ive	vada, New Mexico, Facile is	noo, rexus, washington and	vvioconom.)
	■ No					
	☐ Yes. M	ake sure you fill out So	chedule H: Your Codebtors (C	official Form 106H).		
Par	t 2 Expla	in the Sources of Yo	ur Income			
4.	Fill in the tot	al amount of income ye	employment or from operation on received from all jobs and unhave income that you receive	all businesses, including part	-time activities.	lendar years?
	■ No □ Yes. Fi	II in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
				,		,

Official Form 107

4:19-bk-11486 Doc#: 1 Filed: 03/19/19 Entered: 03/19/19 10:35:49 Page 41 of 59 Yolanda Felicia Jones Debtor 1 Case number (if known) Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. П Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Gross income from Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) From January 1 of current year until SSI and Family \$2,898.00 the date you filed for bankruptcy: Support For last calendar year: Social Security \$13.908.00 (January 1 to December 31, 2018) **Benefits** For the calendar year before that: Social Security \$13,908.00 (January 1 to December 31, 2017) **Benefits** Part 3: List Certain Payments You Made Before You Filed for Bankruptcy Are either Debtor 1's or Debtor 2's debts primarily consumer debts? Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? \square No. Go to line 7. ☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

include payments for attorney for this bank	11	ns, such as child supp	port and alimony.	Also, do not include payments	. to an
Creditor's Name and Address	Dates of payment	Total amount	Amount you	Was this payment for	

List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not

paid

still owe

7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts.

Go to line 7.

Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

Ν	C
IN	C

Yes. List all payments to an insider.

No.

Insider's Name and Address	Dates of payment	Total amount	•	Reason for this payment
		paid	still owe	

4:19-bk-11486 Doc#: 1 Filed: 03/19/19 Entered: 03/19/19 10:35:49 Page 42 of 59 Debtor 1 Yolanda Felicia Jones Case number (if known) Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an 8. insider? Include payments on debts guaranteed or cosigned by an insider. Nο Yes. List all payments to an insider **Insider's Name and Address** Reason for this payment Dates of payment **Total amount** Amount you paid still owe Include creditor's name Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο П Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property **Explain what happened** 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Value Describe what you contributed Dates you

Part 6: List Certain Losses

more than \$600

Charity's Name

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster,

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

Address (Number, Street, City, State and ZIP Code)

contributed

Debtor 1	Valanda	Faliaia	10000
Debioi i	Yolanda	relicia .	Jones

Case number (if known)

	or gambling?						
	■ No □ Yes. Fill in the details.						
	how the loss occurred	nclude	be any insurance of the amount that ins ce claims on line 33	urance has paid. Li	ist pending	Date of your loss	Value of property lost
Par	7: List Certain Payments or Transfers						
	Within 1 year before you filed for bankrupt consulted about seeking bankruptcy or pr Include any attorneys, bankruptcy petition pre	eparin	g a bankruptcy pe	tition?			erty to anyone you
	■ No □ Yes. Fill in the details.						
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not Yo	u	Description and transferred	value of any prope	erty	Date payment or transfer was made	Amount of payment
	Within 1 year before you filed for bankrupt promised to help you deal with your credit Do not include any payment or transfer that y	tors or	to make payment			/ or transfer any prope	erty to anyone who
	■ No □ Yes. Fill in the details.						
	Person Who Was Paid Address		Description and transferred	value of any prope	erty	Date payment or transfer was made	Amount of payment
	Within 2 years before you filed for bankrup transferred in the ordinary course of your Include both outright transfers and transfers r include gifts and transfers that you have alreated No Yes. Fill in the details.	busine nade a	ess or financial aff is security (such as	airs? the granting of a se			
	Person Who Received Transfer Address Person's relationship to you		Description and property transfer		paymen	e any property or ts received or debts exchange	Date transfer was made
	Within 10 years before you filed for bankru beneficiary? (These are often called asset-p ■ No			ny property to a se	elf-settled	trust or similar device	of which you are a
	Yes. Fill in the details.						
	Name of trust		Description and	value of the prope	rty transfe	erred	Date Transfer was made
Par	8: List of Certain Financial Accounts, I	nstrun	nents, Safe Deposi	t Boxes, and Stor	age Units		
	Within 1 year before you filed for bankrupt sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, ass	or oth	ner financial accou	nts; certificates o			
	■ No □ Yes. Fill in the details.						
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)		t 4 digits of ount number	Type of accountinstrument	r	Date account was closed, sold, noved, or ransferred	Last balance before closing or transfer

Debtor 1	Yolanda Felicia Jones	Case number (if known)

21.	-	ou now have, or did you have within 1 year, or other valuables?	before you filed for bankruptcy, ar	ny safe deposit box or other deposito	ory for securities,
		No Yes. Fill in the details.			
		me of Financial Institution dress (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
22.	Hav	e you stored property in a storage unit or pla	ace other than your home within 1	year before you filed for bankruptcy	?
		No Yes. Fill in the details.			
		me of Storage Facility dress (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
Par	t 9:	Identify Property You Hold or Control for S	Someone Else		
23.		ou hold or control any property that someosomeone.	ne else owns? Include any proper	ty you borrowed from, are storing for	, or hold in trust
		No Yes. Fill in the details.			
	_	ner's Name dress (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Describe the property	Value
Par	t 10:	Give Details About Environmental Informa	ation		
or	the p	ourpose of Part 10, the following definitions	apply:		
	toxi	ironmental law means any federal, state, or l c substances, wastes, or material into the ai lations controlling the cleanup of these sub	r, land, soil, surface water, ground		
		means any location, facility, or property as wn, operate, or utilize it, including disposal	_	aw, whether you now own, operate, o	or utilize it or used
		<i>ardous material</i> means anything an environr ardous material, pollutant, contaminant, or s		waste, hazardous substance, toxic s	substance,
₹ер	ort a	ll notices, releases, and proceedings that yo	ou know about, regardless of when	they occurred.	
24.	Has	any governmental unit notified you that you	may be liable or potentially liable	under or in violation of an environme	ental law?
		No Yes. Fill in the details.			
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Hav	e you notified any governmental unit of any	release of hazardous material?		
		No Yes. Fill in the details.			
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice

4:19-bk-11486 Doc#: 1 Filed: 03/19/19 Entered: 03/19/19 10:35:49 Page 45 of 59 Yolanda Felicia Jones Debtor 1 Case number (if known) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. Case Title Court or agency Nature of the case Status of the **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. Name **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Yolanda Felicia Jones Yolanda Felicia Jones Signature of Debtor 2 Signature of Debtor 1 Date March 19, 2019 **Date** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

		k if this is an ided filing
ler Ch	apter 7	12/1:
е	r Ch	r Chapter 7

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims

1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property securing debt:	☐ Retain the property and [explain]:	
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No
name:	☐ Retain the property and redeem it.	_
Description of	Retain the property and enter into a Reaffirmation Agreement.	☐ Yes
property	☐ Retain the property and [explain]:	
securing debt:		
Creditor's	☐ Surrender the property.	□ No

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1	Yolanda Felicia Jones	Case number (if kr.	nown)
name: Descrip property securing	y	 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	☐ Yes
or any ur n the info	rmation below. Do not list real estate le	Leases ou listed in Schedule G: Executory Contracts and Unex ases. Unexpired leases are leases that are still in effect lease if the trustee does not assume it. 11 U.S.C. § 365	t; the lease period has not yet ended.
Describe	your unexpired personal property lease	es	Will the lease be assumed?
Lessor's n Descriptio Property:	name: n of leased		□ No □ Yes
Lessor's n Descriptio Property:	name: n of leased		□ No
Lessor's n Descriptio Property:	name: n of leased		□ No
Lessor's n Descriptio Property:	name: n of leased		□ No
Lessor's n Descriptio Property:	name: n of leased		□ No
Lessor's n Descriptio Property:	name: n of leased		□ No
Lessor's n Descriptio Property:	name: n of leased		□ No
Jnder pen	Sign Below halty of perjury, I declare that I have indihat is subject to an unexpired lease.	cated my intention about any property of my estate tha	nt secures a debt and any personal
	olanda Felicia Jones	XSignature of Debtor 2	
	anda Felicia Jones ature of Debtor 1	Signature of Debtor 2	
Date	March 19, 2019	Date	

Official Form 108

Fill in this i	nformation to identify your case:				only as d	lirected in this form and	in Form
Debtor 1	Yolanda Felicia Jones		12:	2A-1Supp:			
Debtor 2 (Spouse, if filir				■ 1. There i	s no pres	umption of abuse	
United Sta	tes Bankruptcy Court for the: Eastern District of	Arkansas		applies	s will be n	to determine if a presult nade under <i>Chapter</i> 7	
Case numl	per			☐ 3. The Me	ans Test	icial Form 122A-2). does not apply now be	
						y service but it could ap	pply later.
O((; .;	15			☐ Check if	this is a	n amended filing	
	I Form 122A - 1	. ==					
Chapt	er 7 Statement of Your Cur	rent Mor	nthly Inc	ome			12/15
attach a sep case numbe	ete and accurate as possible. If two married people a arate sheet to this form. Include the line number to w r (if known). If you believe that you are exempted froi illitary service, complete and file Statement of Exemp Calculate Your Current Monthly Income	hich the additior n a presumption	nal information a of abuse becau	applies. On the	e top of a	ny additional pages, wri marily consumer debts o	te your name and or because of
	is your marital and filing status? Check one on	lv.					
	ot married. Fill out Column A, lines 2-11.	.,.					
	arried and your spouse is filing with you. Fill ou	it both Columns	A and B. lines	2-11.			
	arried and your spouse is NOT filing with you.						
	Living in the same household and are not lega	•	•	lumns A and	B. lines	2-11.	
	Living separately or are legally separated. Fill of penalty of perjury that you and your spouse are legiving apart for reasons that do not include evadir	out Column A, linegally separated	nes 2-11; do no d under nonban	ot fill out Colu	ımn B. By hat appli	checking this box, you	
101(10A) the 6 moi	e average monthly income that you received from all . For example, if you are filing on September 15, the 6-m on this, add the income for all 6 months and divide the total own the same rental property, put the income from that p	onth period would by 6. Fill in the res	be March 1 throsult. Do not include	ugh August 31 de any income	. If the amo	ount of your monthly incor ore than once. For examp	ne varied during ble, if both
				Column A Debtor 1		Column B Debtor 2 or non-filing spouse	
payro	gross wages, salary, tips, bonuses, overtime, all deductions).		•	\$	0.00	\$	
	ony and maintenance payments. Do not include nn B is filled in.	payments from	a spouse if	\$	0.00	\$	
of you from a and re	nounts from any source which are regularly pa u or your dependents, including child support. an unmarried partner, members of your household commates. Include regular contributions from a sp	Include regular , your depender	contributions nts, parents,	\$	0.00	e	
	in. Do not include payments you listed on line 3. acome from operating a business, profession,	or form		Ψ	0.00	\$	
J. Net II	icome from operating a business, profession,		otor 1				
Gross	s receipts (before all deductions)	\$ 0.00					
	ary and necessary operating expenses	-\$ 0.00					
Net m	nonthly income from a business, profession, or farm	n \$ 0.00	Copy here ->	\$	0.00	\$	
6. Net ir	ncome from rental and other real property						
			otor 1				
	receipts (before all deductions)	\$0.00					
	ary and necessary operating expenses	-\$ 0.00	Copy here ->	¢	0.00	\$	
	nonthly income from rental or other real property	\$	Copy nere ->	· .	0.00	\$	
7. Intere	est, dividends, and royalties			\$	0.00	₹	

Official Form 122A-1

Yolanda Felicia Jones Debtor 1 Case number (if known) Column B Column A Debtor 2 or Debtor 1 non-filing spouse 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For your spouse \$ 9. Pension or retirement income. Do not include any amount received that was a 0.00 \$ benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the 500.00 Family assistance 0.00 Total amounts from separate pages, if any. 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 500.00 500.00 \$ \$ each column. Then add the total for Column A to the total for Column B. Total current monthly income Part 2: Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 500.00 Multiply by 12 (the number of months in a year) **x** 12 6,000.00 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: AR Fill in the state in which you live. Fill in the number of people in your household. 1 42,546.00 Fill in the median family income for your state and size of household. 13. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. 14b. Go to Part 3 and fill out Form 122A-2. Part 3: By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ Yolanda Felicia Jones Yolanda Felicia Jones Signature of Debtor 1 Date March 19, 2019 MM / DD / YYYY

Official Form 122A-1

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. 4:19-bk-11486 Doc#: 1 Filed: 03/19/19 Entered: 03/19/19 10:35:49 Page 54 of 59

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Eastern District of Arkansas

In re	Yolanda Felicia Jones		Case No		
		Debtor(s)	Chapter	7	
	DISCLOSURE OF COMPEN	SATION OF ATTO	RNEY FOR D	EBTOR(S)	
co	ursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b) ompensation paid to me within one year before the filing e rendered on behalf of the debtor(s) in contemplation of	of the petition in bankruptcy	, or agreed to be pai	d to me, for services	
	For legal services, I have agreed to accept		\$	817.00	
	Prior to the filing of this statement I have received		s	817.00	
	Balance Due			0.00	
2. T	he source of the compensation paid to me was:				
	✓ Debtor				
3. T	he source of compensation to be paid to me is:				
	✓ Debtor				
4.	I have not agreed to share the above-disclosed compen	nsation with any other persor	unless they are men	mbers and associates	of my law firm.
	I have agreed to share the above-disclosed compensati copy of the agreement, together with a list of the name				y law firm. A
5. In	n return for the above-disclosed fee, I have agreed to reno	der legal service for all aspec	cts of the bankruptcy	case, including:	
	Representation of the debtor in adversary proceedings a [Other provisions as needed] Negotiations with secured creditors to recreaffirmation agreements and applications 522(f)(2)(A) for avoidance of liens on house	duce to market value; ex s as needed; preparation	emption planning	g; preparation an tions pursuant to	d filing of 11 USC
6. B	y agreement with the debtor(s), the above-disclosed fee of Representation of the debtors in any disc any other adversary proceeding.			ces, relief from s	tay actions or
		CERTIFICATION			
	certify that the foregoing is a complete statement of any ankruptcy proceeding.	agreement or arrangement fo	or payment to me for	representation of th	e debtor(s) in
Ma	arch 19, 2019	/s/ /S/ Clarence \	W. Cash		
Da	te	/S/ Clarence W.			
		Signature of Attorn Clarence W.Cas			
		424 West 4th Str			
		Suite B			
		North Little Roc			
		501-371-9114 F noemi@cashlaw	ax: 501-372-6283		
		Name of law firm			

United States Bankruptcy Court Eastern District of Arkansas

e	Yolanda Felicia Jones		Case No.	
		Debtor(s)	Chapter	
	VERI	FICATION OF CREDITOR N	MATRIX	
bo	ove-named Debtor hereby verifies th	nat the attached list of creditors is true and co	orrect to the best	of his/her knowledge.
e:	March 19, 2019	/s/ Yolanda Felicia Jones		
		Yolanda Felicia Jones		

Signature of Debtor

Arkansas Pathology POB 100559 Florence, SC 29502-0559

AT&T P.O. Box 1259 Oaks, PA 19456

AT&T Wireless 300 S. University Ave Little Rock, AR 72205

AXPM Dental Management West Rock Orthodontics 5100 Talley Rd., Ste. 1 Little Rock, AR 72204

Capital One PO Box 71083 Charlotte, NC 28272

Carol Wright Gifts PO Box 2852 Monroe, WI 53566

CBCS P.O. Box Columbus, OH 43216

Centerpoint Energy P.O. Box 4583 Houston, TX 77210

Central Arkansas Water 221 East Capitol Ave. Little Rock, AR 72203

CHI St. Vincent P.O. Box 1259 Dept. 141529 Oaks, PA 19456

CHI St. Vincent PO Box 677243 Dallas, TX 75267 CHI St. Vincent P.O. Box 23410 Little Rock, AR 72221

Commenity/Lane Bryant P.O. Box 659729 San Antonio, TX 78265

Country Door 1112 Seventh Ave. Monroe, WI 53566

Credit One PO Box 60500 City of Industry, CA 91716-0500

Credit One PO Box 60500 City of Industry, CA 91716-0500

ERC
POB 23870
Jacksonville, FL 32241

Fidelity 19863 I-30, Suite B Benton, AR 72015

Fingerhut P.O. Box 70281 Philadelphia, PA 19176-0281

General Service Bureau, Inc. P.O. Box 641579 Omaha, NE 68164

General Service Bureau, Inc. P.O. Box 641579 Omaha, NE 68164

Indigo Card
P.O. Box 23039
Columbus, GA 31902

Kohls PO Box 2983 Milwaukee, WI 53201

Mason P.O. Box 2802 Monroe, WI 53566-8008

Mason Companies 1251 1st Avenue Chippewa Falls, WI 54729

Merrick Bank POB 660702 Dallas, TX 75266

Montgomery Ward 1112 7th Avenue Monroe, WI 53566-1364

North Little Rock Women's Cl 3401 Springhill Dr., Ste. 390 North Little Rock, AR 72117

Progressive Leasing 256 W. Data Drive Draper, UT 84020

Radiology Associates PO Box 8801 Little Rock, AR 72231

Seventh Ave P.O. Box 2804 Monroe, WI 53566

Seventh Avenue 1112 7th Ave. Monroe, WI 53566-1364

Sprint Wireless P.O. Box 4191 Carol Stream, IL 60197 St. Vincent Infirmary P.O. Box 830913 Birmingham, AL 35283

Surge POB 6812 Carol Stream, IL 60197

Total Card Inc. PO Box 89725 Sioux Falls, SD 57109

Verizon Wireless P.O. Box 408 Newark, NJ 07101

Verve P.O. Box 6812 Carol Stream, IL 60197

Victoria's Secret PO Box 182118 Columbus, OH 43218